FEB 2 0 2007

CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.8)

I hereby certify that this paper (along w	rith any paper referred to as being attached or enclosed) is being submitted by
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22313-1450 or transmitted by facsimile	to the U.S. Patent and Trademark Office, Fax No. (571) 273-8300.
2/10/2	() alter of our and

Date: 2/19/07

Patti Hespell

Mail Stop RCE

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re: Patent Application of Charles A. Eldering et al.

Conf. No.:

9699

: Group Art Unit:

3622

Appln. No.:

09/857,160

: Examiner:

Raquel Alvarez

Filing Date:

01 July 2001

: Attorney Docket No.:

T705-13

Title: Subscriber Identification System

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

AFTER FINAL REQUEST FOR CONTINUED EXAMINATION UNDER 37.C.F.R.1.114

This is a request under 37 CFR 1.114 for continued examination (RCE) of the above identified application in response to the Final Office Action dated November 17, 2006. Enclosed are the following in support of the RCE under C.F.R. 1.114:

	Enter the unentered Amendment previously filed on under 37 C.F.R. 1.11 in the above application.			
\boxtimes	An Amendment/Request for Reconsideration.			
	An Information Disclosure Statement, PTO/SB/08A, PTO/SB/08B and cited references.			
	New formal drawings.			
	A Petition for Extension of Time to for the pending application.			
	Other:			
	- 1 - G2/22/2007 AWONDAF1 00000122 501535 09857160 01 FC:1801 790.00 DA 02 FC:1201 200.00 DA			

PAGE 2/15 * RCVD AT 2/19/2007 4:49:17 PM [Eastern Standard Time] * SVR:USPTO-EFXRF-1/16 * DNIS:2738300 * CSID:267 880 1721 * DURATION (mm-ss):06-00

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Application No. 09/857,160

The following fees are enclosed:

- RCE fee of \$790.00 required under 37 C.F.R. 1.17(e)
- Additional claim fees of \$200.00 for excess claims submitted in the enclosed Amendment, calculated as follows:

					SMALL I	ENTITY	LARGE I	ENTITY
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDIT. FEE	RATE	ADDIT. FEE
TOTAL	13	(-)	Or 20		x 25		x 50	0.00
INDEP.	4	(-)	Or 3		x100		x200	200.00
[] 1st PRESENTATION OF MULTIPLE DEPENDENT CLAIMS					+\$140	.,	+\$280	
					TOTAL		TOTAL	200.00

\boxtimes	The Commissioner is hereby authorized to charge and/or credit Deposit Account No. 501535			
	noted below. A duplicate of this sheet is enclosed.			

- Any overpayments or deficiencies in the above calculated fee(s).
- RCE fee in the amount of \$790.00.
- Additional claim fees in the amount of \$200.00 as calculated above.
- Any additional fees required under 37 C.F.R. §§ 1.16 or 1.17.
- In the event that a Petition for Extension of Time is required, but not enclosed, please charge any extension fee under 37 C.F.R. § 1.136(a) to the Deposit Account noted above.

CORRESPONDENCE ADDRESS

Date:	2/19/07	ado W. 1
Duit.		

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